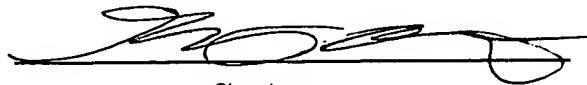
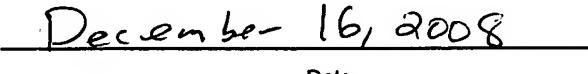


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) <b>3110.ARTH.PT</b>																		
Application Number <b>10/512,113</b>		Filed <b>October 21, 2004</b>																		
For <b>METHOD FOR ELECTRONLESS DEPOSITION OF A METAL LAYER ON SELECTED PORTIONS OF A SUBSTRATE</b>																				
Art Unit <b>1795</b>		Examiner <b>Chacko Davis, Daborah</b>																		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.																				
The requested extension and fee are as follows (check time period desired and enter appropriate fee below):																				
 <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 20%; text-align: center;"><u>Fee</u></th> <th style="width: 50%; text-align: center;"><u>Small Entity Fee</u></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$130</td> <td style="text-align: center;">\$65</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$490</td> <td style="text-align: center;">\$245</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1,110</td> <td style="text-align: center;">\$555</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1,730</td> <td style="text-align: center;">\$865</td> </tr> <tr> <td><input type="checkbox"/> Five Month (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2,350</td> <td style="text-align: center;">\$1,175</td> </tr> </tbody> </table>				<u>Fee</u>	<u>Small Entity Fee</u>	<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1,110	\$555	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,730	\$865	<input type="checkbox"/> Five Month (37 CFR 1.17(a)(5))	\$2,350	\$1,175
	<u>Fee</u>	<u>Small Entity Fee</u>																		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65																		
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245																		
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1,110	\$555																		
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,730	\$865																		
<input type="checkbox"/> Five Month (37 CFR 1.17(a)(5))	\$2,350	\$1,175																		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.																				
<input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.																				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																				
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.																				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0881</u> . A duplicate of this sheet is enclosed.																				
I am the <input type="checkbox"/> applicant/inventor <span style="float: right;">12/22/2008 CCHAU1 00000061 10512113</span> <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. <span style="float: right;">01 FC:1253 1110.00 0P</span> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>44,632</u> <span style="float: right;">Registration number if acting under 37 CFR 1.34(a) _____</span> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). <span style="float: right;">Registration number if acting under 37 CFR 1.34(a) _____</span>																				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																				
 Signature		 Date																		
<u>Bretton L. Crockett</u>		<u>(801) 478-0071</u>																		
Typed or printed name		Telephone Number																		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.																				
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.																				